

2009

Behavioral Risk Factor Surveillance System

WYOMING

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health

Promotion

Division of Adult and Community Health

2009 WYOMING BRFSS

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Introduction and Random Adult Selection Module

INTROQST

HELLO, I'm calling for the [HEALTH DEPARTMENT]. My name is [INTERVIEWER NAME].

We are gathering information about the health of [STATE] residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Is this [XXX-XXXX]?

- 1. CORRECT NUMBER (PROCEED TO NEXT QUESTION) SKP → PRIVRES
- 2. NUMBER IS NOT THE SAME

skp → wrongnum

WRONGNUM - IF INTROQST = 2

Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time.

PRIVRES - IF INTROQST = 1

Is this a private residence?

1. YES, CONTINUE SKP → ISCELL
2. NO, NON-RESIDENTIAL SKP → NONRES

NONRES - IF PRIVRES = 2

Thank you very much, but we are only interviewing private residences in [STATE].

ISCELL - IF PRIVRES = 1

Is this a cellular telephone?

READ IF NECESSARY: By cellular telephone we mean a telephone that is mobile and usable outside of your neighborhood.

- 1. NO, NOT A CELLULAR TELEPHONE, CONTINUE. SKP \rightarrow ADULTS
- 2. YES, A CELLULAR TELEPHONE SKP → CELLYES

CELLYES - IF ISCELL = 2

Thank you very much, but we are only interviewing land line telephones and private residences.

ADULTS - IF ISCELL = 1

I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

_ _ ENTER NUMBER OF ADULTS IF ADULTS = 1 SKP -> ONEADULT

MEN

How many of these adults are men?

_ _ ENTER NUMBER MEN

WOMEN

How many of these adults are women?

_ _ ENTER NUMBER WOMEN

WRONGTOT - IF MEN + WOMEN <> ADULTS

I'm sorry, something is not right.

Number of Men -

Number of Women - +

Number of Adults -

- 1. CORRECT THE NUMBER OF MEN SKP \rightarrow MEN
- 2. CORRECT THE NUMBER OF WOMEN \Rightarrow WOMEN
- 3. CORRECT THE NUMBER OF ADULTS $\mathsf{skp} \hspace{0.1cm} o\hspace{0.1cm} \hspace{0.1cm} \mathsf{adults}$

SELECTED - IF ADULT > 1 AND (MEN + WOMEN) = ADULTS

The person in your household I need to speak with is [RANDOMLY SELECTED ADULT].

Are you the [RANDOMLY SELECTED ADULT]?

1. YES SKP → YOURTHE1

2. NO SKP → GETNEWAD

ONEADULT - IF ADULT = 1

Are you the Adult?

INTERVIEWER NOTE: ASK GENDER IF NECESSARY.

- 1. YES AND THE RESPONDENT IS A MALE. SKP → YOURTHE1
- 2. YES AND THE RESPONDENT IS A FEMALE. SKP -> YOURTHE1
- 3. NO

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ASKGENDR - IF ADULT = 1 AND ONEADULT = 3

Is the Adult a man or a woman?

- 1. MALE
- 2. FEMALE

GETADULT - IF ONEADULT = 3

May I speak with ...

[IF ASKGENDR = 1 SHOW] ...him?
[IF ASKGENDR = 2 SHOW] ...her?

- 1. YES, ADULT IS COMING TO THE PHONE
- 2. NO, GO TO NEXT SCREEN, PRESS F3 TO SCHEDULE A CALL-BACK

YOURTHE1 - IF SELECTED = 1 OR ONEADULT < 3

Then you are the person I need to speak with.

- 1. PERSON INTERESTED, CONTINUE SKP → INTROSCR
- 2. GO BACK TO ADULTS QUESTION. WARNING: A NEW SKP \rightarrow ADULTS RESPONDENT MAY BE SELECTED

GETNEWAD - IF SELECTED = 2

May I speak with the [RANDOMLY SELECTED RESPONDENT]?

- 1. YES, SELECTED RESPONDENT COMING TO THE PHONE SKP → NEWADULT
- 3. GO BACK TO ADULTS QUESTION. WARNING: A NEW SKP \rightarrow ADULTS RESPONDENT MAY BE SELECTED

NEWADULT - IF GETNEWAD = 1

HELLO, I am calling for the [HEALTH DEPARTMENT]. My name is [INTERVIEWER NAME].

We are gathering information about the health of <code>[STATE]</code> residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

- 1. PERSON INTERESTED, CONTINUE
- 2. GO BACK TO ADULTS QUESTION. WARNING: A NEW SKP \rightarrow ADULTS RESPONDENT MAY BE SELECTED

INTROSCR

I will not ask for your last name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. If you have any questions about this survey, please call [GIVE APPROPRIATE STATE TELEPHONE NUMBER].

1. PERSON INTERESTED, CONTINUE SKP → C01Q01

2. GO BACK TO ADULTS QUESTION. WARNING: A NEW SKP \rightarrow ADULTS RESPONDENT MAY BE SELECTED

Core Section 01: Health Status

C01Q01

Would you say that in general your health is...

- 1. Excellent
- 2. Very good
- 3. Good
- 4. Fair

or

- 5. Poor
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 02: Healthy Days-Health-Related Quality of Life

C02Q01

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- _ _ NUMBER OF DAYS
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

CATI NOTE: IF C02Q01 = 88 AND C02Q02 = 88 SKP TO C03Q01

C02Q02

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

- _ _ NUMBER OF DAYS
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

C02Q03 - IF C02Q01 <> 88 AND C02Q02 <> 88

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

- _ _ NUMBER OF DAYS
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

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Core Section 03: Health Care Access

C03Q01

Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C03Q02

Do you have one person you think of as your personal doctor or health care provider?

INTERVIEWER NOTE: IF "NO" ASK: "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"

- 1. YES, ONLY ONE
- 2. MORE THAN ONE
- 3. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C03Q03

Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C03Q04

About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

- 1. Within past year (anytime less than 12 months ago)
- 2. Within past 2 years (1 year but less than 2 years ago)
- 3. Within past 5 years (2 years but less than 5 years ago)
- 4. 5 or more years ago
- 7. DON'T KNOW/NOT SURE
- 8. NEVER
- 9. REFUSED

Core Section 04: Sleep

C04Q01

The next question is about getting enough rest or sleep.

During the past 30 days, for about how many days have you felt you did not get enough rest or sleep?

- _ _ NUMBER OF DAYS
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Core Section 05: Exercise

C05Q01

During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 06: Diabetes

C06Q01

Have you ever been told by a doctor that you have diabetes?

INTERVIEWER NOTE: IF "YES" AND RESPONDENT IS FEMALE, ASK: "Was this only when you were pregnant?"

INTERVIEWER NOTE: IF RESPONDENT SAYS PRE-DIABETES OR BORDERLINE DIABETES, USE RESPONSE CODE 4.

- 1. YES
- 2. YES, BUT FEMALE TOLD ONLY DURING PREGNANCY
- 3. NO
- 4. NO, PRE-DIABETES OR BORDERLINE DIABETES
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 01: Pre-Diabetes

M01Q01 - IF C06Q01 <> 1

Have you had a test for high blood sugar or diabetes within the past three years?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

CATI NOTE: IF C06001 = 4; ANSWER Q2 "YES" (CODE 1)

M01Q02

Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

INTERVIEWER NOTE: IF "YES" AND RESPONDENT IS FEMALE, ASK: "WAS THIS ONLY WHEN YOU WERE PREGNANT?"

- 1. YES
- 2. YES, DURING PREGNANCY
- 3. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 02: Diabetes

M02Q01 - IF C06Q01 = 1

How old were you when you were told you have diabetes?

- _ _ Code age in years [97 = 97 and older]
- 98. DON'T KNOW/NOT SURE
- 99. REFUSED

M02Q02 - IF C06Q01 = 1

Are you now taking insulin?

- 1. YES
- 2. NO
- 9. REFUSED

M02Q03 - IF C06Q01 = 1

About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

- $1 _ _$ Times per day (101-199)
- $2 __$ Times per week (201-299)
- $3 _ _$ Times per month (301-399)
- 4 _ _ Times per year (401-499)
- 888. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

M02Q04 - IF C06Q01 = 1

About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

- 1 _ _ Times per day (101-199)
- $2 _ _$ Times per week (201-299)
- $3 _ _$ Times per month (301-399)
- 4 _ _ Times per year (401-499)
- 555. NO FEET
- 888. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

M02Q05 - IF C06Q01 = 1

About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

- _ _ NUMBER OF TIMES [76 = 76 or greater]
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

M02Q06 - IF C06Q01 = 1

A test for "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A one C"?

- NUMBER OF TIMES [76 = 76 or greater]
- 88. NONE
- 98. NEVER HEARD OF "A one C"
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

CATI NOTE: IF M02Q04 = 555 (NO FEET), GO TO M02Q08.

M02Q07 - IF C06Q01 = 1 AND M02Q04 <> 555

About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?

- _ _ NUMBER OF TIMES [76 = 76 or greater]
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

M02Q08 - IF C06Q01 = 1

When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light.

READ ONLY IF NECESSARY

- 1. Within the past month (anytime less than 1 month ago)
- 2. Within the past year (1 month but less than 12 months ago)
- 3. Within the past 2 years (1 year but less than 2 years ago)
- 4. 2 or more years ago
- 7. DON'T KNOW/NOT SURE
- 8. NEVER
- 9. REFUSED

M02Q09 - IF C06Q01 = 1

Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M02Q10 - IF C06Q01 = 1

Have you ever taken a course or class in how to manage your diabetes yourself?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 07: Hypertension Awareness

C07Q01

Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

INTERVIEWER NOTE: IF "YES" AND RESPONDENT FEMALE, ASK: "Was this only when you were pregnant?"

- 1. YES
- 2. YES, BUT FEMALE TOLD ONLY DURING PREGNANCY SKP → NEXT SECTION 3. NO SKP → NEXT SECTION 4. TOLD BOARDERLINE HIGH OR PRE-HYPERTENSIVE SKP → NEXT SECTION 7. DON'T KNOW/NOT SURE SKP → NEXT SECTION SKP → NEXT SECTION

C07Q02 - IF C07Q01 = 1

Are you currently taking medicine for your high blood pressure?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

9. REFUSED

Core Section 08: Cholesterol Awareness

C08Q01

Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?

- 1. YES
- 2. NO

SKP → NEXT SECTION

7. DON'T KNOW/NOT SURE

SKP → NEXT SECTION

9. REFUSED

SKP → NEXT SECTION

C08Q02 - IF C08Q01 = 1

About how long has it been since you last had your blood cholesterol checked?

READ ONLY IF NECESSARY:

- 1. WITHIN THE PAST YEAR (ANYTIME LESS THAN 12 MONTHS AGO
- 2. WITHIN THE PAST 2 YEARS (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 3. WITHIN THE PAST 5 YEARS (2 YEARS BUT LESS THAN 5 YEARS AGO)
- 4. 5 OR MORE YEARS AGO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C08Q03 - IF C08Q01 = 1

Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 09: Cardiovascular Disease Prevalence

C09Q01

Now I would like to ask you some questions about cardiovascular disease.

Has a doctor, nurse, or other health professional \underline{ever} told you that you had any of the following? For each, tell me "Yes", "No", or you're "Not sure."

Ever told you had a heart attack, also called a myocardial infarction?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C09Q02

Ever told you had angina or coronary heart disease?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C09Q03

Ever told you had a stroke?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 10: Asthma

C10Q01

Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

- 1. YES
- 2. NO

SKP → NEXT SECTION

7. DON'T KNOW/NOT SURE

SKP → NEXT SECTION

9. REFUSED

SKP → NEXT SECTION

C10Q02 - IF C10Q01 = 1

Do you still have asthma?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 11: Tobacco Use

SKP → C11Q05

C11Q01

Have you smoked at least 100 cigarettes in your entire life?

INTERVIEWER NOTE: 5 PACKS = 100 CIGARETTES

- 1. YES
- 2. NO

7. DON'T KNOW/NOT SURE SKP \rightarrow C11Q05 9. REFUSED SKP \rightarrow C11Q05

C11Q02 - IF C11Q01 = 1

Do you now smoke cigarettes every day, some days, or not at all?

- 1. EVERY DAY
- 2. SOME DAYS

3. NOT AT ALL SKP \rightarrow C11Q04

7. DON'T KNOW/NOT SURE SKP \rightarrow C11Q05 9. REFUSED SKP \rightarrow C11Q05

C11Q03 - IF C11Q01 = 1 AND C11Q02 = 1 OR 2

During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

 1. YES
 SKP → C11Q05

 2. NO
 SKP → C11Q05

7. DON'T KNOW/NOT SURE SKP \rightarrow C11Q05 9. REFUSED SKP \rightarrow C11Q05

CATI NOTE: IF C11Q02 = 3, CONTINUE. OTHERWISE, GO TO C11Q05

C11004 - IF C11002 = 3

How long has it been since you last smoked cigarettes regularly?

- 01. WITHIN THE PAST MONTH (LESS THAN 1 MONTH AGO)
- 02. WITHIN THE PAST 3 MONTHS (1 MONTH BUT LESS THAN 3 MONTHS AGO)
- 03. WITHIN THE PAST 6 MONTHS (3 MONTHS BUT LESS THAN 6 MONTHS AGO)
- 04. WITHIN THE PAST YEAR (6 MONTHS BUT LESS THAN 1 YEAR AGO)
- 05. WITHIN THE PAST 5 YEARS (1 YEAR BUT LESS THAN 5 YEARS AGO)
- 06. WITHIN THE PAST 10 YEARS (5 YEARS BUT LESS THAN 10 YEARS AGO)
- 07. 10 YEARS OR MORE
- 08. NEVER SMOKED REGULARLY
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

C11Q05

Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

INTERVIEWER NOTE: SNUS (SWEDISH FOR SNUFF) IS A MOIST SMOKELESS TOBACCO, USUALLY SOLD IN SMALL POUCHES THAT ARE PLACED UNDER THE LIP AGAINST THE GUM.

- 1. EVERY DAY
- 2. SOME DAYS
- 3. NOT AT ALL
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

State Added 02: Smokeless Tobacco

CATI Note: Ask after C11Q05.

WY02Q01

Do you currently use any tobacco products other than cigarettes, chewing tobacco or snuff, such as cigars, pipes, bidis, kreteks, or any other tobacco product?

INTERVIEWER NOTE: BIDIS ARE SMALL, BROWN, HAND-ROLLED CIGARETTES FROM INDIA AND OTHER SOUTHEAST ASIAN COUNTRIES. KRETEKS ARE CLOVE CIGARETTES MADE IN INDONESIA THAT CONTAIN CLOVE EXTRACT AND TOBACCO.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 12: Demographics

C12Q01

What is your age?

- _ _ CODE AGE IN YEARS
- 07. DON'T KNOW/NOT SURE
- 09. REFUSED

C12Q02

Are you Hispanic or Latino?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

CATI NOTE: IF MORE THAN ONE RESPONSE TO C12Q03, CONTINUE. OTHERWISE SKIP TO C12Q05.

C12Q03

Which one or more of the following would you say is your race?

CHECK ALL THAT APPLY

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian or Alaska Native

Or

- 6. Other [specify]
- 8. NO ADDITIONAL CHOICES
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q04 - IF C12Q03 HAS MORE THAN ONE RESPONSE

Which one of these groups would you say best represents your race?

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian or Alaska Native
- 6. Other [specify]
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q05

Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but <u>does</u> include activation, for example, for the Persian Gulf War.

- 1. YES, NOW ON ACTIVE DUTY
- 2. YES, ON ACTIVE DUTY DURING THE LAST 12 MONTHS, BUT NOT NOW
- 3. YES, ON ACTIVE DUTY IN THE PAST, BUT NOT DURING THE LAST 12
- 4. NO, TRAINING FOR RESERVES OR NATIONAL GUARD ONLY
- 5. NO, NEVER SERVED IN THE MILITARY
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q06

Are you ...?

- 1. Married
- 2. Divorced
- 3. Widowed
- 4. Separated
- 5. Never married

Or

- 6. A member of an unmarried couple
- 9. REFUSED

C12Q07

How many children less than 18 years of age live in your household?

- _ _ NUMBER OF CHILDREN
- 88. NONE
- 99. REFUSED

C12Q08

What is the highest grade or year of school you completed?

READ ONLY IF NECESSARY

- 1. NEVER ATTENDED SCHOOL OR ONLY ATTENDED KINDERGARTEN
- 2. GRADES 1 THROUGH 8 (ELEMENTARY)
- 3. GRADES 9 THROUGH 11 (SOME HIGH SCHOOL)
- 4. GRADE 12 OR GED (HIGH SCHOOL GRADUATE)
- 5. COLLEGE 1 YEAR TO 3 YEARS (SOME COLLEGE OR TECHNICAL SCHOOL)
- 6. COLLEGE 4 YEARS OR MORE (COLLEGE GRADUATE)
- 9. REFUSED

C12Q09

Are you currently...?

- 1. Employed for wages
- 2. Self-employed
- 3. Out of work for more than 1 year
- 4. Out of work for less than 1 year
- 5. A Homemaker
- 6. A Student
- 7. Retired

Or

- 8. Unable to work
- 9. REFUSED

C12Q10

Is your annual household income from all sources...

INTERVIEWER NOTE: IF RESPONDENT REFUSES ANY INCOME LEVEL, CODE AS "99" REFUSED

READ ONLY IF NECESSARY

- 04. Less than \$25,000 (\$20,000 to less than \$25,000)
- 03. Less than \$20,000 (\$15,000 to less than \$20,000)
- 02. Less than \$15,000 (\$10,000 to less than \$15,000)
- 01. Less than \$10,000
- 05. Less than \$35,000 (\$25,000 to less than \$35,000)
- 06. Less than \$50,000 (\$35,000 to less than \$50,000)
- 07. Less than \$75,000 (\$50,000 to less than \$75,000)
- 08. \$75,000 or more
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

CATI NOTE: IF C12Q11 = 7777 (DK/NS) OR 9999 (REF), SKIP TO C12Q13 AND C12Q14.

C12011

About how much do you weigh without shoes?

INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FIRST COLUMN. ROUND FRACTIONS UP.

_ _ _ ENTER WEIGHT IN WHOLE POUNDS (EX. 220 POUNDS = 220) OR

WHOLE KILOGRAMS (EX. 65 KILOGRAMS = 9065 OR 110 KILOGRAMS = 9110)

7777. DON'T KNOW/NOT SURE 9999. REFUSED

C12Q12 - IF C12Q11 <> 7777 OR 9999

About how tall are you without shoes?

INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FIRST COLUMN. ROUND FRACTIONS DOWN.

_ _ _ ENTER HEIGHT IN FEET AND INCHES (EX. 5 FEET 9 INCHES = 509)OR METERS AND CENTIMETERS (EX. 1 METER 75 CENTIMETERS = 9175)

7777. DON'T KNOW/NOT SURE 9999. REFUSED

CATI Note: IF C12Q13 = C12Q11 SKIP TO C12Q15.

C12013

How much did you weigh a year ago?

IF FEMALE RESPONDENT SAY: "If you were pregnant a year ago, how much did you weigh before your pregnancy?"

INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FIRST COLUMN. ROUND FRACTIONS UP.

_ _ _ WEIGHT (POUNDS/KILOGRAMS)

POUNDS (EX. 220 POUNDS = 220) OR KILOGRAMS (EX. 65 KILOGRAMS = 9065 OR 110 KILOGRAMS = 9110)

7777. DON'T KNOW/NOT SURE SKP \rightarrow C12Q15 9999. REFUSED SKP \rightarrow C12Q15

C12Q14 - IF (C12Q11 <> 7777, 9999) OR (C12Q13 <> C12Q11)

Was the change between your current weight and your weight a year ago intentional?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q15

What county do you live in?

- _ _ _ FIPS COUNTY CODE
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C12Q16

What is your ZIP Code where you live?

_ _ _ _ ZIP CODE

77777. DON'T KNOW/NOT SURE

99999. REFUSED

C12Q17

Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

- 1. YES
- 2. NO

SKP → C12Q19

7. DON'T KNOW/NOT SURE

SKP → C12Q19

9. REFUSED

SKP → C12Q19

C12Q18 - IF C12Q17 = 1

How many of these telephone numbers are residential numbers?

- _ RESIDENTIAL TELEPHONE NUMBERS [6=6 OR MORE]
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q19

During the past 12 months, has your household been without telephone service for 1 week or more? Do not include interruptions of telephone service because of weather or natural disasters.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Cell Phone Questions (January through October)

C12Q19A

Do you have a cell phone for personal use? Please include cell phones used for both business and personal use.

1. YES

SKP → C12Q19C

- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q19B - IF C12Q19A = 2 OR C12Q19A = 7 OR C12Q19A = 9

Do you share a cell phone for personal use (at least one-third of the time) with other adults?

 1. YES
 SKP → C12Q19D

 2. NO
 SKP → C12Q20

7. DON'T KNOW/NOT SURE \Rightarrow C12Q20 9. REFUSED \Rightarrow C12Q20

C12Q19C - IF C12Q19A = 1

Do you usually share this cell phone (at least one-third of the time) with any other adults?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C12Q19D - IF C12Q19A = 1 OR C12Q19B = 1

Thinking about all the phone calls that you receive on your landline and cell phone, what percent, between 0 and 100, are received on your cell phone?

- _ _ _ ENTER PERCENT [1-100]
- 888. ZERO
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C12Q20

INDICATE SEX OF RESPONDENT. ASK ONLY IF NECESSARY.

1. MALE

SKP → NEXT SECTION

2. FEMALE

C12Q21 - IF C12Q20 = 2 AND C12Q01 < 45

To your knowledge, are you now pregnant?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 13: Caregiver Status

C13Q01

People may provide regular care or assistance to a friend or family member who has a health problem, long-term illness, or disability.

During the past month, did you provide any such care or assistance to a friend or family member?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

State Added 03: Caregiver Status

CATI Note: Ask after C13Q01

WY03Q01 - IF C13Q01 = 1

What age is the person to whom you are giving care?

INTERVIEWER NOTE: IF MORE THAN ONE PERSON, ASK "WHAT IS THE AGE OF THE PERSON TO WHOM YOU ARE GIVING THE MOST CARE?"

- _ _ _ AGE IN YEARS [0-115]
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

Core Section 14: Disability

C14Q01

The following questions are about health problems or impairments you may have.

Are you limited in any way in any activities because of physical mental, or emotional problems?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C14Q02

Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

INTERVIEWER NOTE: INCLUDE OCCASIONAL USE OR USE IN CERTAIN CIRCUMSTANCES.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 15: Alcohol Consumption

C15Q01

During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

- 1. YES
- 2. NO

SKP → NEXT SECTION

7. DON'T KNOW/NOT SURE

SKP → NEXT SECTION

9. REFUSED

SKP → NEXT SECTION

C15Q02 - IF C15Q01 = 1

During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

- 1 _ _ Days per week
- $2 _ _$ Days in past 30 days

888. NO DRINKS IN PAST 30 DAYS

SKP → NEXT SECTION

777. DON'T KNOW/NOT SURE

999. REFUSED

C15Q03 - IF C15Q01 = 1 AND C15Q02 <> 888

One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

INTERVIEWER NOTE: A 40 OUNCE BEER WOULD COUNT AS 3 DRINKS, OR A COCKTAIL DRINK WITH 2 SHOTS WOULD COUNT AS 2 DRINKS.

- _ _ NUMBER OF DRINKS
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

C15Q04 - IF C15Q01 = 1 AND C15Q02 <> 888

Considering all types of alcoholic beverages, how many times during the past $30\ \mathrm{days}\ \mathrm{did}\ \mathrm{you}\ \mathrm{have...}$

[IF C12Q20 = 1 SHOW] ...5... [IF C12Q20 = 2 SHOW] ...4...

...or more drinks on an occasion?

- _ _ NUMBER OF TIMES
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

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C15Q05 - IF C15Q01 = 1 AND C15Q02 <> 888

During the past 30 days, what is the largest number of drinks you had on any occasion?

- _ _ NUMBER OF DRINKS
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Core Section 16: Immunization

C16Q01

A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a flu shot?

- 1. YES
- 2. NO

SKP → C16Q03

7. DON'T KNOW/NOT SURE

SKP → C16Q03

9. REFUSED

SKP → C16Q03

C16Q02 - IF C16Q01 = 1

During what month and year did you receive your most recent flu shot?

- _ _ / _ _ _ MONTH/YEAR
- 77 / 7777 DON'T KNOW/NOT SURE
- 99 / 9999 REFUSED

C16Q03 - IF C16Q01 <> 1

During the past 12 months, have you had a flu vaccine that was sprayed in your nose? The flu vaccine sprayed in the nose is also called ${\sf FluMist}^{\sf m}$.

- 1. YES
- 2. NO

SKP → C16Q05

7. DON'T KNOW/NOT SURE

SKP → C16Q05

9. REFUSED

SKP → C16Q05

C16Q04 - IF C16Q03 = 1

During what month and year did you receive your most recent flu vaccine that was sprayed in your nose?

_ _ / _ _ _ MONTH/YEAR

77 / 7777 DON'T KNOW/NOT SURE

99 / 9999 REFUSED

C16Q05

A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Required Module: Pandemic Flu (January - February)

C23Q01

What do you think is the most effective $\underline{\text{one}}$ thing you can do to prevent getting sick from the flu?

- 1. Avoiding touching your eyes, nose or mouth as much as possible during the flu season
- 2. Avoiding close contact with others who may have the flu
- 3. Getting the flu vaccine
- 4. Taking anti-viral medicine, like Tamiflu, on the first or second day that you have symptoms of the flu.
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

What do you think is the most effective thing you can do to prevent spreading the flu to people when you are sick?

PLEASE READ

- 1. Frequent hand washing
- 2. Covering your mouth and nose when coughing or sneezing
- 3. Staying home when you are sick with the flu
- 4. Getting the flu vaccine
- 5. Something else
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C23Q03

"Pandemic Influenza" or "Pan Flu" is a global outbreak of a new type of serious influenza that almost everyone is susceptible to and it spreads quickly from person to person. Currently, there is <u>not</u> a pandemic flu outbreak occurring.

If there is a pandemic flu outbreak and you do not get the pandemic flu vaccination, what you do think your chances are of getting sick with the pandemic flu?

INTERVIEWER NOTE: PLEASE READ $\underline{\text{BOTH}}$ THE SUBJECTIVE LABEL AND THE PERCENTAGE RANGE.

- 1. Very high (90-100%)
- 2. High (70-89%)
- 3. Average (50-69%)
- 4. Low (20-49%)
- 5. Very Low (0-19%)
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C23Q04

If there was a pandemic flu outbreak, how likely are you to get a pandemic flu vaccination if it was available to you?

- 1. Definitely get one
- 2. Probably get one
- 3. Probably not get one
- 4. Definitely not get a pandemic flu vaccination
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

If public health officials recommended that everyone go to a particular public place such as a local school, fire station, or sports stadium to get vaccinate to prevent the spread of pandemic flu, would you...

PLEASE READ

- 1. Definitely go
- 2. Probably go
- 3. Probably not go
- 4. Definitely not go to a particular place to get vaccinated
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C23Q06

Imagine an outbreak of pandemic flu in the U.S. in the next year. What would be the most important one thing you would want to know?

- 01. How to prevent getting the flu
- 02. How to prevent spreading the flu
- 03. Symptoms of the flu
- 04. How to treat the flu
- 05. Cities where cases of the flu have been identified
- 06. Information about the flu vaccine
- 07. Something else
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

During a pandemic flu outbreak in the U.S., what would be you <u>one most</u> preferred source for getting information about the pandemic flu? Please tell me your one most preferred source.

INTERVIEWER DO NOT READ

- 01. NEWSPAPERS
- 02. TELEVISION
- 03. RADIO
- 04. INTERNET WEBSITES
- 05. YOUR DOCTOR
- 06. THE CDC (CENTERS FOR DISEASE
- CONTROL AND PREVENTION)
- 07. STATE OR LOCAL PUBLIC HEALTH

DEPARTMENTS

- 08. OTHER GOVERNMENT AGENCIES
- 09. FAMILY OR FRIENDS
- 10. RELIGIOUS LEADERS
- 11. SOME OTHER SOURCE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

C23Q08

Excluding vaccination, what is the $\underline{\text{one}}$ most likely thing you would do if a pandemic flu outbreak were reported $\underline{\text{in your state}}$? Please choose one from the following list.

- IF NECESSARY AFTER THE FIRST READ, SAY: "I WILL REPEAT THE QUESTION AND ANSWERS CHOICES TO ASSIST YOUR RECALL.
- 01. Consult a website
- 02. Avoid crowds and public events
- 03. Consult your doctor
- 04. Try to get a prescription for an anti-viral drug such as Tamiflu
- 05. Reduce of avoid travel
- 06. Wash hands frequently
- 07. Wear a face mask
- 08. Keep household members at home while the outbreak
- 09. Stock up on medicines and food to help with flu symptoms $% \left(1\right) =\left(1\right) +\left(1\right$
- 10. Something else
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

If public health officials recommended that everyone stay at home for a month because of a serious outbreak of pandemic flu in your community, are you very likely, somewhat likely, somewhat unlikely, or very unlikely to stay home for a month?

- 1. VERY LIKELY
- 2. SOMEWHAT LIKELY
- 3. SOMEWHAT UNLIKELY
- 4. VERY UNLIKELY TO STAY AT HOME

FOR A MONTH

- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C23Q10 - IF C12Q09 = 1 OR C12Q09 = 2

 ${\rm I}\,{}'{\rm m}$ going to read you a list of job types. Please tell me if you currently work in any of these fields.

- a. Emergency medical services, law enforcement, fire services, or in the manufacture of pandemic vaccines or anti-virals.
- b. Public health, healthcare provider, home health, or in a nursing home.
- c. Homeland or national security as one who would be deployed during a flu pandemic.
- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 17: Arthritis Burden

C17Q01

Next I will ask you about arthritis.

Have you <u>ever</u> been told by a doctor of other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

INTERVIEWER: ARTHRITIS DIAGNOSES INCLUDE:

- * RHEUMATISM, POLYMYALGIA RHEUMATICA
- * OSTEOARTHRITIS (NOT OSTEOPOROSIS)
- * TENDONITIS, BURSITIS, BUNION, TENNIS ELBOW
- * CARPAL TUNNEL SYNDROME, TARSAL TUNNEL SYNDROME
- * JOINT INFECTION, REITER'S SYNDROME
- * ANKYLOSING SPONDYLITIS; SPONDYLOSIS
- * ROTATOR CUFF SYNDROME
- * CONNECTIVE TISSUE DISEASE, SCLERODERMA, POLYMYOSITIS, RAYNAUD'S SYNDROME
- * VASCULITIS (GIANT CELL ARTERITIS, HENOCH-SCHONLEIN PURPURA, WEGENER'S GRANULOMATOSIS, POLYARTERITIS NODOSA)
- 1. YES

2. NO SKP → NEXT SECTION

7. DON'T KNOW/NOT SURE

9. REFUSED

SKP → NEXT SECTION

SKP → NEXT SECTION

$C17Q02 - IF \overline{C17Q01} = 1$

Arthritis can cause symptoms like pain, aching, or stiffness around a joint.

Are you now limited in any way or in any of your usual activities because of arthritis or joint symptoms?

INTERVIEWER NOTE: IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THE RESPONDENT SHOULD BASE ANSWER ON HIS/HER CURRENT EXPERIENCE, REGARDLESS OF WHETHER TAKING ANY MEDICATION.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C17Q03 - IF C17Q01 = 1

In this next question, we are referring to work for pay. Do arthritis or joint symptoms now affect whether you work, the type of work you do, or the amount of work you do?

INTERVIEWER INSTRUCTION: IF RESPONDENT GIVES AN ANSWER TO EACH ISSUE (WHETHER WORKS, TYPE WORK, OR AMOUNT OF WORK), THEN IF ANY ISSUE IS "YES" MARK THE OVERALL RESPONSE AS "YES." IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THE RESPONDENT SHOULD BASE ANSWER ON HIS/HER CURRENT EXPERIENCE, REGARDLESS OF WHETHER TAKING ANY MEDICATION OR TREATMENT.

INTERVIEWER NOTE: THIS QUESTION SHOULD BE ASKED OF ALL RESPONDENTS REGARDLESS OF EMPLOYMENT STATUS.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C17Q04 - IF C17Q01 = 1

During the past 30 days, to what extent has your arthritis or joint symptoms interfered with your normal social activities, such as going shopping, to the movies, or to religious or social gatherings?

INTERVIEWER INSTRUCTION: IF A QUESTION ARISES ABOUT MEDICATIONS OR TREATMENT, THE RESPONDENT SHOULD BASE ANSWER ON HIS/HER CURRENT EXPERIENCE, REGARDLESS OF WHETHER TAKING ANY MEDICATION OR TREATMENT.

PLEASE READ

- 1. A lot
- 2. A little
- 3. Not at all
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C17Q05 - IF C17Q01 = 1

Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication. During the past 30 days, how bad was your joint pain on average? Please answer on a scale of 0 to 10 where 0 is no pain or aching and 10 is pain or aching as bad as it can be.

- _ _ ENTER NUMBER [0-10]
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Core Section 18: Fruit and Vegetables

C18Q01

These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods \underline{you} eat. Include all foods \underline{you} eat, both at home and away from home.

How often do you drink fruit juices such as orange, grapefruit, or tomato?

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C18Q02

Not counting juice, how often do you eat fruit?

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C18Q03

How often do you eat green salad?

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C18Q04

How often do you eat potatoes not including French fries, fried potatoes, or potato chips?

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C18Q05

How often do you eat carrots?

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C18Q06

Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?

INTERVIEWER NOTE: "For example a serving of vegetables at both lunch and dinner would be two servings."

- 1 _ _ PER DAY
- 2 _ _ PER WEEK
- 3 _ _ PER MONTH
- 4 _ _ PER YEAR
- 555. NEVER
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

Core Section 19: Physical Activity

CATI NOTE: IF CORE C12Q09 = 1 (EMPLOYED FOR WAGES) OR 2 (SELF-EMPLOYED) THEN CONTINUE. OTHERWISE, GO TO C19Q02.

C19Q01 - IF C12Q09 = 1 OR 2

When you are at work, which of the following best describes what you do? Would you say-

INTERVIEWER NOTE: IF RESPONDENT HAS MULTIPLE JOBS, INCLUDE ALL JOBS.

PLEASE READ

- 1. Mostly sitting or standing
- 2. Mostly walking
- 3. Mostly heavy labor or physically demanding work
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C19Q02

We are interested in two types of physical activity - vigorous and moderate. Vigorous activities cause large increases in breathing or heart rate while moderate activities cause small increases in breathing or heart rate.

Now, thinking about the moderate activities you do [fill in "when you are not working" if "employed" or self-employed"] in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate?

- 1. YES
- 2. NO SKP → C19Q05
- 7. DON'T KNOW/NOT SURE SKP → C19Q05
- 9. REFUSED SKP → C19Q05

C19Q03 - IF C19Q02 = 1

How many days per week do you do these moderate activities for at least 10 minutes at a time?

- _ _ DAYS PER WEEK [01-07]
- 88. DO NOT DO ANY MODERATE PHYSICAL SKP \rightarrow C19Q05 ACTIVITY FOR AT LEAST 10 MINUTES
- 77. DON'T KNOW/NOT SURE SKP → C19Q05
 99. REFUSED SKP → C19Q05

C19Q04 - IF C19Q03 <> 77, 88, or 99

On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

- _:_ _ HOURS AND MINUTES PER DAY
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

C19Q05

Now, thinking about the vigorous activities you do [fill in "when you are not working" if "employed" or "self-employed"] in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate?

- 1. YES
- 2. NO SKP → NEXT SECTION
- 7. DON'T KNOW/NOT SURE

 9. REFUSED

 SKP → NEXT SECTION

 SKP → NEXT SECTION

C19Q06 - IF C19Q05 = 1

How many days per week do you do these vigorous activities for at least 10 minutes at a time?

- _ _ DAYS PER WEEK [01-07]
- 88. DO NOT DO ANY VIGOROUS PHYSICAL ACTIVITY FOR AT LEAST 10 MINUTES
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

- SKP → NEXT SECTION
- SKP → NEXT SECTION
- SKP → NEXT SECTION

C19Q07 - IF C19Q06 <> 77, 88, or 99

On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

- _:_ _ HOURS AND MINUTES PER DAY
- 777. DON'T KNOW/NOT SURE
- 999. REFUSED

Core Section 20: HIV/AIDS

CATI NOTE: IF RESPONDENT IS 65 YEARS OLD OR OLDER, GO TO NEXT SECTION

C20Q01 - IF C12Q01 < 65

The next few questions are about the national health problem of HIV, the virus that causes AIDS. Please remember that your answers are strictly confidential and that you don't have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.

1. YES

2. NO SKP \rightarrow C20Q05

7. DON'T KNOW/NOT SURE SKP \rightarrow C20Q05 9. REFUSED SKP \rightarrow C20Q05

C20Q02 - C12Q01 < 65 & C20Q01 = 1

Not including blood donations, in what month and year was your last HIV test?

INTERVIEWER NOTE: IF RESPONSE IS BEFORE JANUARY 1985, CODE AS "DON'T KNOW"

INTERVIEWER NOTE: IF THE RESPONDENT REMEMBERS THE YEAR BUT CANNOT REMEMBER THE MONTH, CODE THE FIRST TWO DIGITS 77 AND THE LAST FOUR DIGITS FOR THE YEAR.

_ _ / _ _ _ CODE MONTH AND YEAR

[EXAMPLE: JUNE OF 2006 = 062006]

77/7777. DON'T KNOW/NOT SURE 99/9999. REFUSED

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C20Q03 - C12Q01 < 65 & C20Q01 = 1

Where did you have your last HIV test — at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else?

INTERVIEWER NOTE: IF THE RESPONDENT INDICATES A "PUBLIC HEALTH CLINIC", CODE THE RESPONSE AS 04.

- 01. PRIVATE DOCTOR OR HMO OFFICE
- 02. COUNSELING AND TESTING SITE
- 03. HOSPITAL
- 04. CLINIC
- 05. JAIL OR PRISION (OR OTHER CORRECTIONAL FACILITY)
- 06. DRUG TREATMENT FACILITY
- 07. AT HOME
- 08. SOMEWHERE ELSE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

CATI NOTE: ASK C20Q04, IF C20Q02 = WITHIN LAST 12 MONTHS; OTHERWISE GO TO C20005.

C20Q04 - IF C12Q01 < 65 & C20Q02 = WITHIN LAST 12 MONTHS

Was it a rapid test where you could get your results within a couple of hours?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C20Q05 - IF C12Q01 < 65

I'm going to read you a list. When I'm done, please tell me if any of the situations apply to you. You do not need to tell me which one.

- You have used intravenous drugs in the past year
- You have been treated for a sexually transmitted disease or venereal disease in the past year
- You have given or received money or drugs in exchange for sex in the past year
- You had anal sex without a condom in the past year

Do any of these situations apply to you?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 21: Emotional Support and Life Satisfaction

C21Q01

The next two questions are about emotional support and your satisfaction with life.

How often do you get the social and emotional support you need?

INTERVIEWER NOTE: IF ASKED SAY: "PLEASE INCLUDE SUPPORT FROM $\underline{\textbf{ANY}}$ SOURCE".

PLEASE READ

- 1. Always
- 2. Usually
- 3. Sometimes
- 4. Rarely
- 5. Never
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

C21Q02

In general, how satisfied are you with your life?

PLEASE READ

- 1. Very satisfied
- 2. Satisfied
- 3. Dissatisfied
- 4. Very dissatisfied
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Core Section 22: Cancer Survivors

C22Q01

Now I am going to ask you about cancer.

Have you <u>ever</u> been told by a doctor, nurse, or other health professional that you had cancer?

INTERVIEWER NOTE: READ ONLY IF NECESSARY: BY "OTHER HEALTH PROFESSIONAL" WE MEAN A NURSE PRACTITIONER, A PHYSICIAN'S ASSISTANT, SOCIAL WORKER, OR SOME OTHER LICENSED PROFESSIONAL.

- 1. YES
- 2. NO SKP → CORE CLOSING
- 7. DON'T KNOW/NOT SURE SKP → CORE CLOSING
 9. REFUSED SKP → CORE CLOSING

C22Q02 - IF C22Q01 = 1

How many different types of cancer have you had?

- 1. ONLY ONE
- 2. TWO
- 3. THREE OR MORE
- 7. DON'T KNOW/NOT SURE SKP \rightarrow CORE CLOSING 9. REFUSED SKP \rightarrow CORE CLOSING

C22Q03 - IF C22Q01 = 1

[IF C22Q02 = 1, ASK] At what age were you told that you had cancer?

[IF C22Q02 = 2 OR 3, ASK] At what age was your first diagnosis of cancer?

INTERVIEWER NOTE: THIS QUESTION REFERS TO THE FIRST TIME THEY WERE TOLD ABOUT THEIR FIRST CANCER.

- _ _ AGE IN YEARS [07=97 AND OLDER]
- 98. DON'T KNOW/NOT SURE
- 99. REFUSED

C22Q04 - IF C22Q01 = 1

[IF C22Q02 = 1, ASK] What type of cancer was it?

[IF C22Q02 = 2 or 3, ASK] With your most recent diagnoses of cancer, what type of cancer was it?

INTERVIEWER NOTE: PLEASE READ LIST ONLY IF RESPONDENT NEEDS PROMPTING FOR CANCER TYPE (I.E. NAME OF CANCER) [1-28]:.

BREAST

01. Breast cancer

FEMAL REPRODUCTIVE (GYNECOLOGIC)

- 02. Cervical cancer (cancer of the cervix)
- 03. Endometrial cancer (cancer of the uterus)
- 04. Ovarian cancer (cancer of the ovary)

HEAD/NECK

- 05. Head and neck cancer
- 06. Oral cancer
- 07. Pharyngeal (throat) cancer
- 08. Thyroid

GASTROINTESTINAL

- 09. Colon (intestine) cancer
- 10. Esophageal (esophagus)
- 11. Liver cancer
- 12. Pancreatic (pancreas) cancer
- 13. Rectal (rectum) cancer
- 14. Stomach

LEUKEMIA/LYMPHOMA (LYMPH NODES AND BONE MARROW)

- 15. Hodgkin's Lymphoma (Hodgkin's Disease)
- 16. Leukemia (blood) cancer
- 17. Non-Hodgkin's Lymphoma

MALE REPRODUCTIVE

- 18. Prostate cancer
- 19. Testicular cancer

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SKIN

- 20. Melanoma
- 21. Other skin cancer

THORACIC

- 22. Heart
- 23. Lung

URINARY CANCER

- 24. Bladder cancer
- 25. Renal (kidney) cancer

OTHERS

- 26. Bone
- 27. Brain
- 28. Neuroblastoma
- 29. Other
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

Module 05: Inadequate Sleep

M05Q01

I would like to ask you a few questions about your sleep patterns.

On average, how many hours of sleep do you get in a 24-hour period? Thing about the time you actually spend sleeping or napping, not just the amount of sleep you think you should get.

INTERVIEWER NOTE: ENTER HOURS OF SLEEP IN WHOLE NUMBERS, ROUNDING 30 MINUTES (1/2 HOUR) OR MORE UP TO THE NEXT WHOLE HOUR AND DROPPING 29 OR FEWER MINUTES.

- _ _ NUMBER OF HOURS
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

M05Q02

Do you snore?

INTERVIEWER NOTE: IF THE RESPONDENT INDICATES THAT THEIR SPOUSE OR SOMEONE TOLD HIM/HER THAT THEY SNORE, THEN THE ANSWER TO THE QUESTION IS "YES", THE RESPONDENT SNORES.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M05Q03

During the past 30 days, for about how many days did you find yourself unintentionally falling asleep during the day?

- _ _ NUMBER OF DAYS [01-30]
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

M05Q04

During the past 30 days, have you ever nodded off or fallen asleep, even just for a brief moment, while driving?

- 1. Yes
- 2. No
- 3. Don't drive
- 4. Don't have license
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 09: Women's Health

M09Q01 - IF C13Q20 = 2

The next questions are about breast and cervical cancer.

A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- 1. YES
- 2. NO SKP → M09Q03
- 7. DON'T KNOW/NOT SURE \Rightarrow M09Q03 9. REFUSED \Rightarrow M09Q03

M09Q02 - IF C13Q20 = 2 & M09Q01 = 1

How long has it been since you had your last mammogram?

READ ONLY IF NECESSARY

- 1. Within the past year (ANYTIME LESS THAN 12 MONTHS AGO)
- 2. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 3. Within the past 3 years (2 YEARS BUT LESS THAN 3 YEARS AGO)
- 4. Within the past 5 years (3 YEARS BUT LESS THAN 5 YEARS AGO)
- 5. 5 or more years ago
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M09003 - IF C13020 = 2

A clinical breast exam is when a doctor, nurse, or other health professional feels the breasts for lumps. Have you ever had a clinical breast exam?

- 1. YES
- 2. NO SKP → M09Q05
- 7. DON'T KNOW/NOT SURE \Rightarrow M09Q05 9. REFUSED \Rightarrow M09Q05

M09Q04 - IF C13Q20 = 2 & M09Q03 = 1

How long has it been since your last breast exam?

READ ONLY IF NECESSARY

- 1. Within the past year (ANYTIME LESS THAN 12 MONTHS AGO)
- 2. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 3. Within the past 3 years (2 YEARS BUT LESS THAN 3 YEARS AGO)
- 4. Within the past 5 years (3 YEARS BUT LESS THAN 5 YEARS AGO)
- 5. 5 or more years ago
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M09Q05 - IF C13Q20 = 2

A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

- 1. YES
- 2. NO SKP → M09Q07
- 7. DON'T KNOW/NOT SURE \Rightarrow M09Q07 9. REFUSED \Rightarrow M09Q07

M09Q06 - IF C13Q20 = 2 & M09Q05 = 1

How long has it been since you had your last Pap test?

READ ONLY IF NECESSARY

- 1. Within the past year (ANYTIME LESS THAN 12 MONTHS AGO)
- 2. Within the past 2 years (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 3. Within the past 3 years (2 YEARS BUT LESS THAN 3 YEARS AGO)
- 4. Within the past 5 years (3 YEARS BUT LESS THAN 5 YEARS AGO)
- 5. 5 or more years ago
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

$M09Q07 - IF C13Q20 = 2 \& C13Q21 \iff 1$

Have you had a hysterectomy?

READ ONLY IF NECESSARY: "A hysterectomy is an operation to remove the uterus (womb)."

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 11: Colorectal Cancer Screening

M11Q01 - C13Q01 >= 50

A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?

- 1. YES
- 2. NO SKP → M11Q03
- 7. DON'T KNOW/NOT SURE SKP → M11Q03
- 9. REFUSED SKP → M11Q03

M11Q02 - C13Q01 >= 50 & M11Q01 = 1

How long has it been since you had your last blood stool test using a home kit?

READ ONLY IF NECESSARY

- 1. Within the past year (anytime less than 12 months ago)
- 2. Within the past 2 years (1 year but less than 2 years ago)
- 3. Within the past 3 years (2 years but less than 3 years ago)
- 4. Within the past 5 years (3 years but less than 5 years ago)
- 5. 5 or more years ago
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M11Q03 - C13Q01 >= 50

Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

- 1. YES
- 2. NO SKP \rightarrow M11Q01
- 7. DON'T KNOW/NOT SURE SKP \rightarrow M11Q01 9. REFUSED SKP \rightarrow M11Q01

M11Q04 - C13Q01 >= 50 & M11Q03 = 1

For a SIGMOIDOSCOPY, a flexible tube is inserted into the rectum to look for problems. A COLONOSCOPY is similar, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Was your MOST RECENT exam a sigmoidoscopy or a colonoscopy?

- 1. SIGMOIDOSCOPY
- 2. COLONOSCOPY
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M11Q05 - C13Q01 >= 50 AND M11Q03 = 1

How long has it been since you had your last sigmoidoscopy or colonoscopy?

READ ONLY IF NECESSARY

- 1. WITHIN THE PAST YEAR (ANYTIME LESS THAN 12 MONTHS AGO)
- 2. WITHIN THE PAST 2 YEARS (1 YEAR BUT LESS THAN 2 YEARS AGO)
- 3. WITHIN THE PAST 3 YEARS (2 YEARS BUT LESS THAN 3 YEARS AGO)
- 4. WITHIN THE PAST 5 YEARS (3 YEARS BUT LESS THAN 5 YEARS AGO)
- 5. WITHIN THE PAST 10 YEARS (5 YEARS BUT LESS THAN 10 YEARS AGO)
- 6. 10 OR MORE YEARS AGO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 21: Mental Illness and Stigma

M21Q01

Now, I am going to ask you some questions about how you have been feeling during the past 30 days...

About how often during the past 30 days did you feel $\underline{\text{nervous}}$ - would you say $\underline{\text{all}}$ of the time, $\underline{\text{most}}$ of the time, $\underline{\text{some}}$ of the time, $\underline{\text{a little}}$ of the time, or none of the time?

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q02

During the past 30 days, about how often did you feel $\underline{\text{hopeless}}$ — all of the time, $\underline{\text{most}}$ of the time, $\underline{\text{some}}$ of the time, $\underline{\text{a little}}$ of the time, or none of the time?

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q03

During the past 30 days, about how often did you feel $\underline{\text{restless}}$ or $\underline{\text{fidgety}}$?

IF NECESSARY READ: ALL, MOST, SOME, A LITTLE, OR NONE OF THE TIME.

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q04

During the past 30 days, about how often did you feel $\underline{\text{so depressed}}$ that nothing could cheer you up?

IF NECESSARY READ: ALL, MOST, SOME, A LITTLE, OR NONE OF THE TIME.

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q05

During the past 30 days, about how often did you feel that $\frac{\text{everything}}{\text{was an effort?}}$

IF NECESSARY READ: all, most, some, a little, or none of the time?

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q06

During the past 30 days, about how often did you feel worthless?

IF NECESSARY READ: all, most, some, a little, or none of the time?

- 1. ALL
- 2. MOST
- 3. SOME
- 4. A LITTLE
- 5. NONE
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q07

The next question asks if any type of mental health condition or emotional problem has recently kept you from doing your work or other usual activities.

During the past 30 days, for about how many days did your emotions or feelings keep you from doing your work or other usual activities?

INTERVIEWER NOTE: IF ASKED, "USUAL ACTIVITIES" INCLUDE HOUSE WORK, SELF-CARE, CARE GIVING, VOLUNTEER WORK, ATTENDING SCHOOL, STUDIES OR OTHER USUAL ACTIVITIES".

- _ _ NUMBER OF DAYS
- 88. NONE
- 77. DON'T KNOW/NOT SURE
- 99. REFUSED

M21Q08

Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q09

These next questions ask about peoples' attitudes toward mental illness and its treatment. How much do you $\underline{\text{agree}}$ or $\underline{\text{disagree}}$ with these statements about people with mental illness...

Treatment can help people with mental illness lead normal lives. Do you - agree slightly or strongly, or disagree slightly or strongly?

INTERVIEWER NOTE: IF ASKED THE PURPOSE OF M16Q09 SAY: "ANSWERS TO THESE QUESTIONS WILL BE USED BY HEALTH PLANNERS TO HELP UNDERSTAND PUBLIC ATTITUDES ABOUT MENTAL ILLNESS AND ITS TREATMENT AND TO HELP GUIDE HEALTH EDUCATION PROGRAMS".

READ ONLY IF NECESSARY

- 1. AGREE STRONGLY
- 2. AGREE SLIGHTLY
- 3. NEITHER AGREE NOR DISAGREE
- 4. DISAGREE SLIGHTLY
- 5. DISAGREE STRONGLY
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M21Q10

People are generally caring and sympathetic to people with mental illness. Do you - agree slightly or strongly, or disagree slightly or strongly?

INTERVIEWER NOTE: IF ASKED THE PURPOSE OF M16Q09 SAY: "ANSWERS TO THESE QUESTIONS WILL BE USED BY HEALTH PLANNERS TO HELP UNDERSTAND PUBLIC ATTITUDES ABOUT MENTAL ILLNESS AND ITS TREATMENT AND TO HELP GUIDE HEALTH EDUCATION PROGRAMS".

- 1. AGREE STRONGLY
- 2. AGREE SLIGHTLY
- 3. NEITHER AGREE NOR DISAGREE
- 4. DISAGREE SLIGHTLY
- 5. DISAGREE STRONGLY
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 25: Random Child Selection

M25Q01 - IF C12Q07 < 88

[IF C12Q07 = 1 SHOW] Previously, you indicated there was one child age 17 or younger in your household. I would like to ask you some questions about that child.

[IF C12Q07 > 1 & < 88 SHOW] Previously, you indicated there were [ANS C13Q07] children age 17 or younger in your household. Think about those [ANS C12Q07] children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last. Please include children with the same birth date, including twins, in the order of their birth.

I have some additional questions about one specific child. The child I will be referring to is the [Xth] child in your household. All following questions about children will be about the [Xth] child.

What is the birth month and year of the [Xth] child?

 $_$ $_$ / $_$ $_$ $_$ CODE MONTH AND YEAR

77/7777. DON'T KNOW/NOT SURE 99/9999. REFUSED

M25Q02 - IF C12Q07 < 88

Is the child a boy or a girl?

- 1. BOY
- 2. GIRL
- 9. REFUSED

M25Q03 - IF C12Q07 < 88

Is the child Hispanic or Latino?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M25Q04 - IF C12Q07 < 88

Which one or more of the follow would you say is the race of the child?

CHECK ALL THAT APPLY

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian or Alaska Native or
- 6. Other [SPECIFY]
- 8. NO ADDITIONAL CHOICES
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M25Q05 - IF C12Q07 < 88 & M25Q04 HAS MORE THAN ONE RESPONSE INDICATED

Which $\underline{\text{one}}$ of these groups would you say $\underline{\text{best}}$ represents the child's race?

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian or Alaska Native or
- 6. Other [SPECIFY]
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M25Q06 - IF C12Q07 < 88

How are you related to the child?

- 1. Parent (include biologic, step, or adoptive parent)
- 2. Grandparent
- 3. Foster parent or guardian
- 4. Sibling (include biologic, step, and adoptive sibling)
- 5. Other relative
- 6. Not related in any way
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

Module 27: Childhood Immunization

CATI NOTE: IF CHILD'S AGE IS >= 6 MONTHS, CONTINUE. OTHERWISE GO TO NEXT MODULE.

M27Q01 - IF C12Q07 < 88 AND SELECTED CHILD'S AGE IS >= 6 MONTHS

During the past 12 months, has [he/she] had a flu vaccination? There are two types of flu vaccinations. One is a shot and the other is a spray in the nose.

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

M27Q02 - IF C12Q07 < 88 AND SELECTED CHILD'S AGE IS >= 6 MONTHS

During what month and year did [he/she] receive their most recent flu vaccination? The flu vaccination may have been either the flu shot or the flu spray. The flu spray is the flu vaccination that is sprayed in the nose.

```
_ _ / _ _ _ MONTH/YEAR
77 / 7777 DON'T KNOW/NOT SURE
```

99 / 9999 REFUSED

Module 28: Child Human Papilloma Virus (HPV)

M28Q01 - IF SELECTED CHILD IS FEMALE BETWEEN AGE 9 & 17

I have two additional questions about a vaccine the selected child may have had.

A vaccine to prevent the human papilloma virus or HPV infection is available and is called cervical cancer vaccine, HPV shot, or ${\tt GARDASIL}^{\tt B}$. Have this child EVER had the HPV vaccination?

INTERVIEWER NOTE: Human Papilloma Virus (Human Pap·uh·loh·muh Virus); Gardasil (Gar·duh· seel)

1	VFC
⊥ .	TEO

2.	NO	SKP	\rightarrow	NEXT	MODULE
3.	DOCTOR REFUSED WHEN ASKED	SKP	→	NEXT	MODULE
7	DOM/T VNOW/NOT CLIDE	ar.	_	MESZE	MODIII E

7. DON'T KNOW/NOT SURE

9. REFUSED

SKP → NEXT MODULE

SKP → NEXT MODULE

M28Q02 - IF M28Q01 = 1

How many HPV shots did she receive?

- NUMBER OF SHOTS
- 03. ALL SHOTS
- 07. DON'T KNOW/NOT SURE
- 09. REFUSED

State Added 01: Children's Health

CATI Note: Continue directly from Child HPV Module (M28) if there is a child at home; otherwise skip to WY01Q03.

WY01Q01 - IF C12Q07 > 0 AND C12Q07 < 88 AND CHLDAGE2 >= 2

How tall is the child now?

INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, ENTER "9" IN FIRST COLUMN. ROUND FRACTIONS DOWN.

- _ _ / _ _ HEIGHT (FT/INCHES; METERS/CENTIMETERS)
- 77/77. DON'T KNOW/NOT SURE
- 99/99. REFUSED

WY01Q02 - IF C12Q07 > 0 AND C12Q07 < 88 AND CHLDAGE2 >= 2

How much does the child weigh now?

INTERVIEWER NOTE: IF RESPONDENT ANSWERS IN METRICS, PUT "9" IN FIRST COLUMN. ROUND FRACTIONS UP.

- _ _ / _ _ HEIGHT FT/INCHES; METERS/CENTIMETERS)
- 77/77. DON'T KNOW/NOT SURE
- 99/99. REFUSED

WY01Q03

[Read the following transition only if child health care questions (WY01Q01-WY01Q02) are asked...]: These last few questions are about you.

Have you heard of any activities to address the problem of diabetes in your community?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

WY01Q04

Have you ever been told by a doctor, nurse or other health professional that you have chronic obstructive pulmonary disease (C.O.P.D.), emphysema, or chronic bronchitis?

- 1. YES
- 2. NO
- 7. DON'T KNOW/NOT SURE
- 9. REFUSED

State Added 04: Interview Length

WY04Q01 [CATI NOTE: INTERVIEW TIME]

[INTERVIEW LENGTH IN MINUTES INSERTED INTO DATA SET BY CONTRACTOR]

CLOSING

That is my last question. Everyone's answers will be combined to give us information about the health practices of people in this state. Thank you very much for your time and cooperation.